DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

ATTORNEY DOCKET NO. 100200145-1

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

WER OF ATTORNEY: a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prisiness in the Patent and Trademark Office connected therewith: Customer Number 022879 Place Customer Number Bar Code Label here Send Correspondence to: HEWLETT-PACKARD COMPANY Intellectual Property Administration P.O. Box 272400 Fort Collins, Colorado 80527-2400 hereby declare that all statements made herein of my own knowledge ade on information and belief are believed to be true; and further to the knowledge that willful false statements and the like so apprisonment, or both, under Section 1001 of Title 18 of the United Statements.	nternational Ap (if applica	
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Ill Name of Inventor: Laura Dickey Citizenship:	tates Code and	
esidence:	tates Code and	
ost Office Address: Same as Residence	tates Code and	

Inventor's Signature

ATTORNEY DOCKET NO. 100200145-1

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continued)

Full Name of # 2 joint inventor:	Vaideswar Gopalakrishnan	Citizenship:
Residence:	347 Kiely Blvd., D-203, San Jose, Califo	ornia 95129
Post Office Address:	Same as Residence	
Inventor's Signature	Date	
	Sate	
Full Name of # 3 joint inventor	:	Citizenship:
Residence:		
Post Office Address:		
Inventor's Signature	Date	
S. C. Signator	Date	
Full Name of # 4 joint inventor	r:	Citizenship:
Residence:		
Post Office Address:		
Inventor's Signature	Date	
myentor a alguature	Date	
Full Name of # 5 joint invento	r:	Citizenship:
Residence:		
Post Office Address:		
Inventor's Signature	Date	
Full Name of # 6 joint invento	nr:	Citizenship:
Residence:		
Post Office Address:		
Inventor's Signature	Date	
E. II Name of # 7 total trace of	nr.	Citizenship:
Full Name of # 7 joint inventor Residence:	or:	Okadiship.
Post Office Address:		
Inventor's Signature	Date	
		Citizanchia
Full Name of # 8 joint invent	or:	Citizenship:
Residence:		
Post Office Address:		
Inventor's Signature	Date)